Name in Full

Certificate of Death

Caleb Bowdle

Town

Died at Andrews P.O.

County

Caroline.

MARYLAND

Date 189 7 | Month 2 | Day 19 | Age Y. 69 M. 1 D. 7 | Native of Md. | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~

Number of children living 3

Husband ~~Wife~~ of Mrs. Ebenezum Bowdle

Father's ~~Name~~ Caleb Bowdle

Mother's Name

Cause of Death { Primary Arteria Sclerosis 9 How long sick

Immediate Influenza, Cerebral Hemorrh~~age~~ ~~Accident, Suicide, Homicide~~

Reported by J. R. Phillips

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 67365

Name in Full Jane Cosey (Date of birth not known) Certificate of Death

Died at Town Concord County Caroline MARYLAND

Date 189 9 Month 2 Day 8 Age Y. 70 M. about D. Native of Occupation Housewife

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ Widow Widower Divorced Number of children living 6

Husband Wife of Levin Cosey

Father's Name Not Known Mother's Name Not Known

Cause of Death: Primary Paralysis general How long sick 3½ mos.

Immediate 45 ~~Accident, Suicide, Homicide~~

Reported by Jas. H. Ward.

Address Andersontown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Name in Full

Certificate of Death

Louis DuHadway

Died at Town: Tuckahoe Creek County: Caroline MARYLAND

Date 1894 Month: Feb Day: 23 | Age Y.: 52 M.: 5 D.: 13 | Native of: Maryland | Occupation: Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ | Number of children living: 2

~~Husband~~ ~~Wife~~ of —

Father's Name: Thomas DuHadway | Mother's Name: Rebecca DuHadway

Cause of Death — Primary: Senile & General debility — How long sick: Several months

Immediate: Pneumonia 72 hrs — Accident, Suicide, Homicide

Reported by: John DuHadway M. D.

Address: Tuckahoe Creek Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, F5163

Name in Full — Certificate of Death

Gilbert Hayes Hubbard,

Died at Near Ridgely — Town — Caroline — County — MARYLAND

Date 1899 — Month 2 — Day 9 — Age Y. 9 M. 1 D. — Native of Maryland — Occupation Infant

Male ~~Female~~ — ~~White~~ Colored — ~~Married~~ Single — ~~Widow~~ ~~Widower~~ — ~~Divorced~~ Number of children living —

Husband of
Wife

Father's Name Jefferson Hayes Hubbard — Mother's Name Augusta Ritchett

Cause of Death — Primary Pneumonia — How long sick one week

Immediate — Accident, Suicide, Homicide

Reported by Dr. D. D. Stone —

Address Ridgely Md. —

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 66868

Name In Full

Lillie B. Johnson

Certificate of Death

Died at Town: near Concord County: Caroline MARYLAND

Date 189 Month: 2 Day: 4 | Age Y.: 10 M.: 5 D.: 18 | Native of | Occupation

~~Male~~ Female | White Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of
Wife

Father's Name: J. W. Johnson | Mother's Name

Cause of Death: Primary 161 | How long sick

Immediate | Accident, Suicide, Homicida

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Name in Full — Certificate of Death

James Jones

Died at Town Henderson County Caroline . MARYLAND

Date 1894. Month Mar. Day 17 Age Y. 80. M. 8 D. | Native of Md | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ ~~Single~~ Widower ~~Widow~~ ~~Divorced~~ | Number of children living 5

Husband of
Wife

Father's Name 141

Mother's Name Mary Jones

Cause of Death { Primary Old Age (How long sick 4 weeks) / Immediate Inflamation of bladder } Accident, Suicide, Homicide

Reported by James E. Graham M.D.

Address Ingleside Md.

Must be signed by physician, if eny in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 6506B

Name in Full

Certificate of Death

Martha Lord

Died at Town: Preston County: Caroline Co. MARYLAND

Date 1899 Month: Feb. Day: 7

Age Y. 67 M. – D. –

Native of: Md.

Occupation: Housewife

~~Male~~ Female

White ~~Colored~~

Married ~~Single~~

Widow Widower

Divorced

Number of children living: 6

~~Husband~~ Wife of Alexandrus L. Lord

Father's Name: David Todd

Mother's Name: Betsy Todd

Cause of Death:

Primary: Supposed to be Chronic Tuberculosis. How long sick: 10 days with Influenza

Immediate: Influenza 9

Accident, Suicide, Homicide

Reported by J. R. Phillips M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55969

Name In Full — Certificate of Death

Elizabeth Potter

Died at near Town Denton County Caroline MARYLAND

Date 189 9 Month 2 Day 25 | Y. 69 M. D. | Native of | Occupation

~~Male~~ / Female — White / Colored — ~~Married~~ / Single — ~~Widow~~ / ~~Widower~~ — ~~Divorced~~ — ~~Number of children living~~

Husband of
Wife

Father's Name — Mother's Name

Cause of Death — Primary — How long sick

Immediate — 16h — Accident, Suicide, Homicide

Reported by Denton Journal 3-4

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Rev. J. W. Hosler,
Denver M. E. Ch.

Name in Full

Capt. James Rice

Certificate of Death

Died at Town: Fording Creek County: Caroline MARYLAND

Date 1894 Month: Feb Day: 23 | Age Y.: 77 M.: 10 D.: | Native of: Maryland | Occupation: Sailor

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name: Ezekiel Rice

Mother's Name: Elizabeth Rice

Cause of Death — Primary: La Grippe 9 | How long sick: 6 days

Immediate: Pneumonia

Accident, Suicide, Homicide

Reported by: John Custard M. D.

Address: Fording Creek Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, F5068

Name In Full Mrs. Mary M. Shockley

Certificate of Death

Died at Town Greensborough County Caroline MARYLAND

Date 189 9 Month 2-12 Day | Age Y. 30 M. D. | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living

~~Husband~~ Wife of Wm. E. Shockley

Father's Name | Mother's Name

Cause of Death: Primary 161 | How long sick

Immediate | Accident, ~~Suicide~~, Homicide

Reported by Greensborough Free Press

Address 2-17

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Name in Full

Certificate of Death

Mary Shockley

Died at Town Greensboro County Caroline MARYLAND

Date 1899 Month Feb. Day 11 | Age Y. 30 M. 2 D. 20 | Native of Canada | Occupation Housewife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ | Number of children living 2

~~Husband~~ Wife of William E. Shockley

Father's Name A. B. Gotwals | Mother's Name Mary Reynard

Cause of Death: Primary Childbirth | How long sick 10 days

Immediate Puerperal Mania | Accident, Suicide, Homicide

Reported by Geo. N. Bolton M.D.

Address Greensboro Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full — Certificate of Death

Thos. Alexander Smith

Died at Denton — Town — Caroline — County — MARYLAND

Date 189 9 — Month 2 — Day 1 — Age Y. 76 M. D. — Native of — Occupation

Male / ~~Female~~ — White / Colored — Married / Single — Widow / Widower — Divorced — Number of children living

Husband of
Wife

Father's Neme — Mother's Name

Cause of Death — Primary — Immediate — 161 — How long sick — Accident, Suicide, Homicide

Reported by American Union 2-2-

Address

Must be signed by physician, if any In attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79508

Name in Full

Certificate of Death

Mrs Adeline Spurry

Town: Denton County: Caroline MARYLAND

Died at

Date 1899 Month: Feb Day: 22

Age Y. M. D.: about 80

Native of: del

Occupation: Farmers wife

~~Male~~ / Female

White / ~~Colored~~

Married / ~~Single~~

~~Widow~~ / Widower

~~Divorced~~

Number of children living: one

Husband / Wife of: Geo W. Spurry

Father's Name:

Mother's Name: ?

Cause of Death — Primary: Grip - followed by Broncal Pneumonia

How long sick: 3 weeks

Cause of Death — Immediate:

~~Accident, Suicide, Homicide~~

Reported by: Alf. Hardcastle M. D.

Address: Denton Md Feb 23/99

Must be signed by physician, if any in attendance, otherwiso by coroner, undortaker or minister.

LIBRARY BUREAU. 55068

Name in Full

Certificate of Death

George A. Stafford

Died at Town Hillsdale County Caroline MARYLAND

Date 189 9 Month 2 Day 1 | Age Y. 29 M. D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | Widow ~~Widower~~ | ~~Divorced~~ Number of ~~children~~ living

Husband of

Wife

Father's Name

Mother's Name

Cause of Death { Primary

Immediate Consumption 229 How long sick

Accident, Suicide, Homicide

Reported by Chestertown Enterprise,

Address [redacted] Feb. 7, 1900

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Name In Full John A. Shirley

Certificate of Death

Died at Town near Denton County Caroline MARYLAND

Date 189	Month	Day	Age	Y.	M.	D.	Native of	Occupation
	3	12	74					

~~Male~~ ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 13

Husband of
Wife

Father's Name

Mother's Name

Cause of Death: Primary — La Grippe 9 — How long sick

Immediate — Heart Trouble — Accident, Suicide, Homicide

Reported by American Union 2-16

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 70808